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**Date** July 14, 2005

**To** **Attn: Minh Dinh, Art Unit: 2132**

**From** Michael E. Schmitt, Reg. No. 36,921, Ganz Law P.C.

**Re** **AMENDMENT** for the following application:

- Application serial number: 09/749,142
- Attorney docket number: DE000002
- Filing date: December 27, 2000
- First named inventor: Thomas Wille
- Title: DATA-PROCESSING DEVICE AND METHOD OF OPERATING SAID DEVICE

**Tel**

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**Pages** 17 + cover sheet

**This fax transmits the following documents:**

- |                               |          |
|-------------------------------|----------|
| • Transmittal                 | 1 page   |
| • Fee Transmittal (Duplicate) | 2 pages  |
| • Credit Card Payment Form    | 1 page   |
| • Amendment                   | 12 pages |

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PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0851-0031

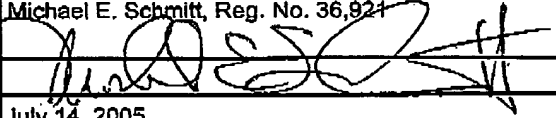
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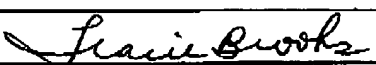
|   |                      |                        |          |
|---|----------------------|------------------------|----------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 09/749,142             |          |
|   | Filing Date          | December 27, 2000      |          |
|   | First Named Inventor | Thomas Wille           |          |
|   | Art Unit             | 2132                   |          |
|   | Examiner Name        | Minh Dinh              |          |
| Total Number of Pages in This Submission  | 17                   | Attorney Docket Number | DE000002 |

| ENCLOSURES (Check all that apply)  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance communication to Technology Center (TC)        |
| <input checked="" type="checkbox"/> Fee Attached                             | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Change of Correspondence Address                 | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer                              |   |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund                               |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s)                              |   |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    | Remarks   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |   |
|-------------------------|---|
| Firm or Individual name | Michael E. Schmitt, Reg. No. 36,924   |
| Signature               |  |
| Date                    | July 14, 2005   |

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| Typed or printed name   | Tracie Brooks   |      |               |
| Signature   |  | Date | July 14, 2005 |

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 300.00

**Complete If Known**

|                      |                      |
|----------------------|----------------------|
| Application Number   | 09/749,142           |
| Filing Date          | December 27, 2000    |
| First Named Inventor | Thomas Wille, et al. |
| Examiner Name        | Minh Dinh            |
| Art Unit             | 2132                 |
| Attorney Docket No.  | DE000002 (PLP-2.034) |

**METHOD OF PAYMENT** (check all that apply)

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue          | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

| Fee (\$) | Small Entity Fee (\$) |
|----------|-----------------------|
| 50       | 25                    |

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

**Total Claims****Extra Claims****Fee (\$)****Fee Paid (\$)**

26 - 20 or HP = 6 x 50 = 300

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims****Extra Claims****Fee (\$)****Fee Paid (\$)**

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
|--------------|--------------|--|----------|---------------|

- 100 = / 50 = (round up to a whole number) x =

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

**Fees Paid (\$)**

Other (e.g., late filing surcharge):

**SUBMITTED BY**

Signature

Registration No.  
(Attorney/Agent)

36,921

Telephone (503) 844.9009

Name (Print/Type) Michael E. Schmitt

Date July 14, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 300.00

**Complete if Known**

|                      |                      |
|----------------------|----------------------|
| Application Number   | 09/749,142           |
| Filing Date          | December 27, 2000    |
| First Named Inventor | Thomas Wille, et al. |
| Examiner Name        | Minh Dinh            |
| Art Unit             | 2132                 |
| Attorney Docket No.  | DE000002 (PLP-2.034) |

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☐ Deposit Account Deposit Account Number: 50-1001 Deposit Account Name: Ganz Law

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☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
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| Design           | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
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| Provisional      | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues) \_\_\_\_\_

Each independent claim over 3 (including Reissues) \_\_\_\_\_

Multiple dependent claims \_\_\_\_\_

**Total Claims** \_\_\_\_\_ **Extra Claims** \_\_\_\_\_ **Fee (\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

26 - 20 or HP = 6 x 50 = 300

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** \_\_\_\_\_ **Extra Claims** \_\_\_\_\_ **Fee (\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

- 3 or HP = x =

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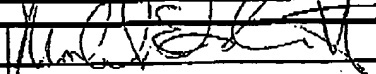
**Total Sheets** \_\_\_\_\_ **Extra Sheets** \_\_\_\_\_ **Number of each additional 50 or fraction thereof** \_\_\_\_\_ **Fee (\$)** \_\_\_\_\_ **Fee Paid (\$)** \_\_\_\_\_

- 100 = / 50 = (round up to a whole number) x =

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

|  |                         |                           |
|--|-------------------------|---------------------------|
| <b>SUBMITTED BY</b>  | <b>Registration No.</b> | <b>Telephone</b>          |
| Signature:  | 36,921 (Attorney/Agent) | (503) 844.9009            |
| <b>Name (Print/Type)</b> Michael E. Schmitt  |                         | <b>Date</b> July 14, 2005 |

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Thomas Wille, et al.

Examiner: Minh Dinh

Serial No.: 09/749,142

Art Unit: 2132

Filed: December 27, 2000

Confirm. No.: 4761

Attorney Docket No.: DE000002

For: DATA-PROCESSING DEVICE AND METHOD  
OF OPERATING SAID DEVICE

Mail Stop Amendment

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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*Trace Brooks*

Trace Brooks

Date of Deposit: July 14, 2005

AMENDMENT

Sir:

Please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which listing begins on  
page 2 of this paper.

**Remarks** begin on page 8 of this paper.

07/15/2005 MBINAS 00000027 09749142

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Page 1 - AMENDMENT DATED July 14, 2005  
Serial No. 09/749,142